

Bridgnorth Rural District Council



Annual Report



of the

Medical Officer of Health



**For the Year Ending
31st December, 1953**

PUBLIC HEALTH OFFICERS OF AUTHORITY

Medical Officer of Health :

JAMES L. GREGORY, M.B., CH.B., F.R.F.P.S., D.P.H., D.T.M.&HY.

Senior Sanitary Inspector :

S. J. YELLAND, Cert.S.I.B.

Additional Sanitary Inspector :

G. S. N. INGHAM, Cert.S.I.B.

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Bridgnorth Rural District Council

BRIDGNORTH,
August, 1954.

TO THE CHAIRMAN AND COUNCILLORS

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the health and sanitary conditions in your district for the year ended 31st December, 1953.

During that year Dr. James L. Gregory was your Medical Officer of Health and he terminated his appointment on 31st December, after a period of service of two years.

The Vital Statistics for the year are satisfactory and no serious outbreak of Infectious Disease occurred, though measles was prevalent among the children during the first four months of the year.

44 Council houses and 9 private houses were completed, and the Ministry of Works' Hostels at Stottesdon and Morville were converted into flats—a total of 64 dwellings as compared with 60 in 1952. 12 Council and 21 private houses were under construction at the end of the year. The Council now owns 311 of the total 3,776 inhabited dwellings in the district (8.23%).

The new water supplies for the parishes of Highley and Alveley were brought into use during the year, thus allowing the local supplies to be dispensed with.

The Low Level Water Supply Scheme, approved by the Ministry of Housing and Local Government in December, 1952, will be completed in stages, and a starting date of 1st April, 1954, for Stage I was agreed with the Ministry.

Negotiations continued regarding the Joint High Water Level Water Supply Scheme, though the project has not yet reached the stage of a Public Inquiry.

With the introduction of piped-water supplies the provision of proper systems of sewerage and sewage disposal becomes necessary, and the situation regarding this matter in the parishes of Highley, Alveley, Claverley and Worfield gave cause for concern.

Preparation of the scheme for a new sewage disposal plant in Highley to replace the existing inadequate installations continued, with the prospect of a Public Inquiry being held early in 1954.

I should like to express my appreciation to Mr. S. J. Yelland and Mr. G. S. N. Ingham for their assistance in the preparation of Sections C, D and E of this Report.

I have the honour to be,

Your obedient Servant,

MARGARET H. F. TURNBULL,

Medical Officer of Health.

SECTION A

STATISTICS AND SOCIAL CONDITIONS

GENERAL STATISTICS

Area of District in Acres	100,897
Estimated Population (mid-1953)	16,540
Number of Inhabited Houses	3,776
Rateable Value of the District (at 1st April, 1954)	£64,703
Estimated Product of a Id. Rate	£250

VITAL STATISTICS

LIVE BIRTHS

Legitimate	{ Male	119
	{ Female	105
	{ Total	224
	{ Rate per 1,000 of population	13.5
Illegitimate	{ Male	—
	{ Female	10
	{ Total	10
	{ Rate per 1,000 of population	0.60
Total	{ Male	119
	{ Female	115
	{ Total	234
	{ Crude Birth Rate per 1,000 of population	14.1
	{ " Corrected " Rate per 1,000 of population	19.8

STILL-BIRTHS

Male	2
Female	2
Total	4
Rate per 1,000 live and still-births	16.7

DEATHS

Male	67
Female	63
Total	130
Crude Death Rate per 1,000 of population	7.9
" Corrected " Death Rate per 1,000 of population	9.3

DEATHS RELATED TO PREGNANCY AND CHILDBIRTH

Total	1
Rate per 1,000 total births (live + still)	4.2

DEATHS OF INFANTS UNDER 1 YEAR OF AGE

Legitimate	{	Male	5
	{	Female	1
	{	Total	6
	{	Rate per 1,000 legitimate live births	26.8

Illegitimate—Nil

Total	{	Male	5
	{	Female	1
	{	Total	6
	{	Rate per 1,000 total live births	25.5

DEATHS FROM :

Cancer (all sites)	23
Measles	0
Whooping-cough	1
Diphtheria	0
Tuberculosis : Pulmonary	2
Non-pulmonary	0

RATES FOR ENGLAND AND WALES

Birth Rate per 1,000 of population	15.5
Still-birth Rate per 1,000 live + still-births	22.4
Death Rate per 1,000 of population	11.4
Infant Mortality Rate per 1,000 live births	26.8

NOTES ON VITAL STATISTICS

Population.—The Registrar-General's estimated mid-year population for the district for 1953 was 16,540, compared with 16,510 in 1952. This figure (which includes members of the Armed Forces stationed in the area) is used for the calculation of Birth and Death Rates.

Births.—The number of live births in 1953 was 234—an increase of 7 on the previous year. Of this total, 10 were illegitimate. The crude Birth Rate per 1,000 of the population was 14.1, but when corrected to make it comparable with figures for the country in general, the rate was 19.9. This is considerably higher than the rate for England and Wales of 15.5.

Still-births.—Four still-births were registered during the year and the Still-birth rate per 1,000 (live + still) births was 16.7 The Still-birth Rate for England and Wales was 22.4.

Deaths.—There were 130 deaths in the area (67 male and 63 female)—a decrease of 8 on the figures for 1952.

The Crude Death Rate per 1,000 of the population was 7.9—corrected by comparability factor to 9.3. The Death Rate for England and Wales was 11.4.

CAUSES OF DEATH

			Male	Female	Total
Diseases of Heart and Circulation ...	...	...	18	25	43
Cancer (all sites) ...	...	...	10	13	23
Vascular lesions of Nervous System ...	...	...	6	10	16
Pneumonia ...	...	...	4	—	4
Bronchitis ...	...	...	2	2	4
Accidents (excepting motor vehicle) ...	...	...	4	—	4
„ (motor vehicle) ...	...	...	3	—	3
Tuberculosis (Pulmonary) ...	...	...	2	—	2
„ (Non-Pulmonary) ...	...	...	—	—	—
Influenza ...	...	...	1	1	2
Whooping-cough ...	...	...	1	—	1
Diabetes ...	...	...	—	1	1
Suicide ...	...	...	—	1	1
All other causes ...	...	...	16	10	26
All Causes ...			67	63	130

As in recent years, Diseases of the Heart and Circulation, Cancer and Vascular lesions of the Nervous System, together account for the greatest number of deaths (63.1% of the total). Deaths from cancer numbered 23, as compared with 24 in 1952. Only one death was due to cancer of the lungs or respiratory system. The cancer death rate was 1.391 per 1,000 of the population, a decrease of 0.06 on the figures for 1952. Pulmonary Tuberculosis accounted for 2 deaths during 1953, as compared with 4 in 1952.

Infant Mortality.—Six infants died during 1953 before reaching the age of 1 year; of these 5 died under the age of 4 weeks.

The infant mortality rate per 1,000 live births was 25.5, which is very slightly lower than the rate for England and Wales of 26.8 (I.M.R. for the area for 1952 was 30.8).

Deaths Related to Pregnancy and Childbirth.—One death was registered in this category, there having been none in 1952.

Natural Increase of Population.—The births exceeded the deaths by 104.

SECTION B

GENERAL PROVISION OF HEALTH SERVICES

Public Health Officers.—The names and qualifications of officers are given at the beginning of this Report. Dr. James L. Gregory terminated his appointment as Medical Officer of Health on 31st December, 1953, after a period of two years in the service of the Council. There were no other changes of staff during the year.

Laboratory Services.—Advantage continued to be taken of the facilities available at the Public Health Laboratory, Royal Salop Infirmary, Shrewsbury, for the bacteriological examination of samples of water, milk, ice cream, and pathological specimens.

Ambulance Services.—The provision of Ambulance Services is the responsibility of the County Council as Local Health Authority. The central depot is in Shrewsbury (Tel. 6331 after 16/8/54) and two ambulances and a car for sitting-cases are stationed at Bridgnorth for local purposes.

Home Nursing, Domiciliary Midwifery and Health-Visiting Services.—The Local Health Authority provides the above services and details may be found in the Annual Report of the County Medical Officer of Health.

Hospital Facilities.—There has been no change in the hospital facilities available in the area during the year. The Bridgnorth and South Shropshire Infirmary admits general medical and surgical cases, including children, and also has a maternity unit. Cases of Infectious Disease are admitted to either the Wolverhampton Isolation Hospital or to Monkmoor Isolation Hospital, Shrewsbury, and sufferers from Tuberculosis to Shirlett Sanatorium or Prees Heath Sanatorium. Innage House is now reserved as Part III accommodation under the National Assistance Act, and the chronic sick are nursed at Shifnal Hospital.

WELFARE CENTRES

1.—Bridgnorth Welfare Centre, Northgate.

A Child Welfare Clinic is held every Monday from 10 a.m.—12.30 p.m. and 1.30—4.30 p.m., when a Medical Officer is in attendance. Welfare Foods were distributed during the year during clinic hours and were obtainable at other times from the Food Office. (Since the County Council assumed responsibility for the distribution of the Welfare Foods (July, 1954) changes have been made in the arrangements, and details have been published in the local press).

A Minor Ailments Clinic for school children is held on week-days (except Saturday) from 9.0—10.0 a.m., and those attending are seen weekly by the Medical Officer.

Other sessions held during the year at the Welfare Centre, and under the direction of the County Council were as follows :—

ORTHOPAEDIC CLINIC : 1st and 3rd Mondays in every month, 11.0 a.m.—1.0 p.m.

CHEST CLINIC.—4th Tuesday in every month.

SPEECH THERAPY.—Fridays, 9.30—12.30 p.m. ; 1.30—4.0 p.m.

DIPHTHERIA IMMUNISATION AND VACCINATION.—3rd Saturday in every month, 10.0—11.0 a.m.

The Centre continued to be used by the Hospital authorities for out-patient Clinics owing to lack of accommodation in the hospital premises.

2.—Miners' Welfare Annexe, Highley.

A Child Welfare Clinic is held every Tuesday from 1.30—4.30 p.m., and Welfare Foods are obtainable during these hours.

Good advantage continued to be taken of this clinic and that at Bridgnorth, by mothers of young children within reasonable distance of the centres.

The Minor Ailments Clinic at Highley was discontinued in March, 1952.

DOMESTIC HELP SERVICE

This service is provided by the County Council and during the year enquiries regarding Domestic Helps were dealt with at Bridgnorth Welfare Centre on Mondays and Fridays from 2.0 p.m.—4.30 p.m. Four workers were available for duty and the public made good use of the service.

Under Section 29 of the National Health Service Act, 1946, domestic help may be provided “for any person who is ill, an expectant mother, mentally defective, aged, or a child not over compulsory school age.”

Since July, 1954, changes have been made in the arrangements and the hours are now as follows :

Monday, Wednesday and Friday—2.15—4.30 p.m.

SECTION C

SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLIES

COMPREHENSIVE SCHEMES

1. High Level Areas.

There is little progress to report during the past year and the scheme has not yet reached the stage of a Public Inquiry, although work is now in hand with this end in view.

2. Low Level Scheme.

Approval to this scheme was given in December last, but at the same time it was stipulated that the construction should take place over a period of years on account of the amount of capital involved. The scheme was then broken down into a number of stages, the first being the pipeline from Neen Savage, via Bagginswood, Chorley, Billingsley and Chelmarsh to Eardington, as it was considered that these localities were the worst-watered in the district. Tenders for the work have been invited and it is expected that the contract will commence in April, 1954.

3. Parish of Highley.

The new scheme to supply this parish was brought into operation during the month of May. The number of new connections to the mains has been most gratifying and consumption figures were almost doubled during a period of three months. It has been found possible to dispense with the old plant, and the Council have been relieved of a considerable source of anxiety.

4. Parish of Alveley.

The new mains in the " Highley and Alveley " water scheme have also been laid, and extensions taken to Birds Green and Allum Bridge. In this parish also it has been possible to cease drawing on the local source of supply although the plant is still retained as a stand-by in case of emergency.

Whilst fewer connections than in Highley have been made, nevertheless the response in general must be considered to be quite satisfactory.

5. Parish of Stottesdon.

Conditions have not materially changed during the past year, excepting that consumption appears to be still increasing. It has been necessary to purchase a new engine to drive the pumps, as the old engine broke down under the strain of protracted periods of heavy work. The quality of the water is variable and appears to be subject to intermittent pollution, mainly of surface origin. However, a new pipeline to serve this village is included in the first stage of the low level water scheme, and it is expected that it will be possible to dispense with the present source within twelve to eighteen months when water is likely to be available from the Elan Aqueduct.

6. Parishes of Worfield and Claverley.

Both parishes are supplied from the Hilton Borehole operated by Wolverhampton Corporation. The supply is adequate in quality and quantity. A few applications have been received for minor extensions of the mains, but financial considerations are the deciding factor in determining whether or not such extensions should be undertaken.

Details of premises supplied with water from public piped supplies are as follows :—

Parish	Premises		Percentage of Parish
	Direct	Standpipe	
Alveley	102	60	45.5
Astley Abbotts	14	—	9.4
Chelmarsh	8	4	8.3
Claverley	213	—	50.2
Highley	483	50	84.4
Kinlet	69	—	43.3
Stottesdon	48	—	17.9
Tasley	45	—	75.0
Morville	18	—	15.2
Neen Savage	25	—	23.8
Worfield (Civilian)	131	—	28.7
(With R.A.F. Houses)	300		48.1

The remainder of the District is supplied by wells, springs, etc., and in some cases private piped supplies.

PURITY OF SUPPLIES

Water supplied by the Bridgnorth and Wolverhampton Corporations is chlorinated at source, but that drawn from the Elan Aqueduct is only rough filtered and treated with lime, and not chlorinated at source. The local supply at Morville is also chlorinated.

The Council, having considered the position affecting the water from the Elan Aqueduct, decided that chlorination was necessary and stations are to be constructed at all points of connection to the Birmingham Corporation's mains. Up to date two stations are in operation, the first at Neen Savage and the second at Meaton Lane. A third station, at the Winwoods, will be provided as part of the first stage of the low level water supply scheme.

SAMPLES 1953

Alveley	10	Satisfactory
Morville	1	„
Monkhoppton	1	„

SEWERAGE AND SEWAGE DISPOSAL

Consequent upon the introduction of piped water supplies the necessity for schemes of sewerage and sewage disposal has grown. This is particularly so in the parishes of Worfield, Alveley, Highley and Claverley.

At Worfield preliminary investigations into the possibility of sewerage the remainder of the village are taking place and it is hoped that a scheme will be submitted to the Council for consideration during 1954.

The position at Alveley is growing more serious and difficult with each passing year. In my opinion it is a matter of urgency on public health grounds, that a scheme should be provided for this village with the least possible delay. At present most of the sewage is discharged on to fields and into ditches, and recently a case was brought to my notice in which noxious matter was finding its way into the highway ditches. This state of affairs must not long be tolerated.

During the year the Council reconsidered the question of sewerage and sewage disposal at Highley. It was decided that to multiply the number of disposal plants in the village would be completely wrong in principle, especially as all the existing plants were obsolete and in a bad state of repair. Taking into account the necessity for further sewerage and sewage disposal for the scheme for erection of a further 116 houses in the village, it seemed obvious that the right course to adopt was to provide a completely new disposal plant, capable of dealing with the whole parish, including new house construction, and to discontinue using the works at New England, Wrens Nest and Vicarage Lane. The Council's Consulting Engineer has been instructed to prepare a suitable scheme and it is hoped that an Inquiry will be held early in 1954.

Conditions have changed but very little in Claverley and the need for a proper scheme of sewerage and sewage disposal is as urgent as ever. A determined effort to proceed with this scheme should be made, especially in view of the proximity of the village school to the main village sewage ditch.

An improved maintenance service for the housing estates disposal works has been instituted. A full-time sewage works attendant is employed and all plants are now visited at least once each week and some even more frequently.

During the year many houses have had new drainage systems installed, particularly in the parish of Highley. Conversion of pan closets to W.Cs. has also proceeded with remarkable rapidity, so much so that the end of the night soil collecting service has been fixed for May, 1954, when it is anticipated that more than 90% of the houses in the village will have water-borne sanitation.

REFUSE COLLECTION AND DISPOSAL

The Council have refuse tips at Aston (Claverley), Alveley, Highley and Ditton Priors, and a new tip has also been started at Chelmarsh. The use of this new tip has considerably reduced the time and cost previously involved in hauling to Highley for disposal, refuse from areas around Bridgnorth on the west side of the river.

The Council's contracting service at the R.A.F. Station, initiated in March, 1953, enabled the two regular service vehicles to be employed over a larger area, resulting in all parishes of the District being served, and a weekly collection made in the villages of Alveley, Claverley, Highley and Worfield.

RODENT CONTROL

A full-time operative is employed on this service and the provision of a small van has enabled a great increase to be made in the work carried out.

SANITARY INSPECTION

A total of 639 visits and inspections was made during the year to Houses, Factories, Food Premises and in connection with Drainage Works, Water Supplies and Infectious Disease Cases. As is usual in a Rural area, the majority were in respect of water and drainage work.

Seventy-three houses were inspected as a result of complaints, in connection with improvements, or for action under the Public Health Acts.

Nine houses were dealt with during the year as being unfit for human habitation.

INSPECTIONS FOR THE YEAR 1953

Inspections of					Total
Houses—Public Health Acts	...	...	...	...	22
Houses—Housing Acts	...	...	...	...	51
Complaints investigated	...	...	...	...	11
Camping Sites	...	...	...	...	16
Water Samples	...	...	...	...	38
Infectious Disease Cases	...	...	...	...	16
Drainage Works Tests, etc.	...	...	...	...	98
Rats and Mice Acts	...	...	...	...	10
Revisits to Property under notice	...	...	...	...	4
Food Premises	...	...	...	...	6
Water—General	...	...	...	...	60
Ice Cream Samples	...	...	...	...	18
Tinned Foods and other Articles of Food	...	...	...	...	8
Houses Disinfected	...	...	...	...	2
Miscellaneous	...	...	...	...	279
					<hr/> 639 <hr/>

SECTION D

HOUSING

Number of inhabited houses	...	...	...	...	...	3,776
Number of houses owned by the Council	...	...	...	...	...	311
Number of houses completed in 1953—						
(a) Council...	...	...	...	...	...	55
(b) Private	...	...	...	...	...	9
						— 64
Number of applications for houses	...	...	...	...	...	298
Number of houses under construction at 31/12/53—						
(a) Council...	...	...	...	...	...	12
(b) Private	...	...	...	...	...	21
						— 33

In the figure of houses owned by the Council is included 14 temporary hutments at Coton Camp which are managed by the Council on behalf of the Minister of Housing and Local Government, and two hostels taken over from the Minister of Works, which have been converted into flats.

New Houses.—During the past year 44 new houses were completed and Ministry of Works Hostels at Stottesdon and Morville were converted into 5 and 6 flats respectively, so that the total units of accommodation provided by the Council during the year was 55.

The rate of private building declined somewhat and 9 houses only were completed, as compared with 12 during the previous year. To date 57 private houses have been completed since the end of the war, together with 214 new houses by the Council, making a total of 271 post-war permanent houses.

Future Programme.—The Council plan to commence building a further 101 houses during the next year. The greatest proportion of this number is intended for Highley parish, where 60 houses are to be built as the first stage of a scheme comprising of 116 houses in total.

Applications for new houses numbered 298 at the end of the year, and it seems that the demand for new houses is not yet satiated, although this figure may possibly be reduced on closer investigation.

Unfit Houses.—Little serious attempt to take effective action under the Provisions of the Housing Act, 1936 and other appropriate legislation has been made. Actual complaints have received attention and repairs of a minor character have been carried out. Nothing practical which will stem the tide of deterioration which is so visible in the older cottages in the district, has, however, been undertaken.

The real source of difficulty is the cost of repairs in relation to rents paid, which makes remedial work almost an economic impossibility. Possibly the new Bill designed to meet this situation, now before Parliament, may alter the situation over a period of time.

Improvement and Reconditioning.—Within your District the operation of the HOUSING ACT 1949 relating to “IMPROVEMENTS” has proved to be a relative failure. During the past year 47 inquiries were made, but for various reasons only 2 were formally submitted to the Council. In both cases grants were made.

There are encouraging signs however that the ratepayers of the District are taking more interest in the scheme and it is anticipated that the number of applications will increase in the future.

The value of reconditioning old cottages cannot be too strongly emphasised, especially in the more sparsely populated localities of the Rural District. If property is allowed to deteriorate or to remain in a sub-standard condition, the result is either that the house must eventually be demolished, or a demand is made for new Council houses costing possibly £1,700 each, or the rural worker leaves the country and finds work and housing accommodation in the towns—a serious matter for an area in which agriculture is the predominant industry. All or any of these tendencies may be arrested by providing a reasonable standard of amenity for the country-dweller. The Improvement Grant is probably one of the most powerful means to this end at the disposal of the Council. From every point of view it is far better to preserve than to destroy.

Details of post-war building are as follows :—

Parish				Under Construction at 31/12/53	Completed in year ending 31/12/53	Total Completed Post-War
Alveley ...	...	...	...	—	32	50
Claverley ...	...	...	...	—	—	26
Worfield ...	...	...	...	—	6	38
Tasley ...	...	...	...	—	—	6
Morville ...	...	...	...	—	6 (Hostel)	18
Shipton ...	...	...	...	—	—	6
Highley ...	...	...	...	—	6	56
Kinlet ...	...	...	...	—	—	10
Neen Savage ...	...	...	...	—	—	10
Stottesdon ...	...	...	...	6		
					5 (Hostel)	5
Eudon George ...	...	...	...	6		
				—	—	—
				12	55	225
				==	==	==

PRIVATE BUILDINGS

Under Construction at 31/12/53	Completed 31/12/52—31/12/53	Total Post-War
21	9	57

SECTION E

INSPECTION, ETC., OF FOOD

MEAT

Slaughtering and distribution of meat for the area continued from Wolverhampton, and inspection is carried out at the abattoir before distribution.

It is expected that decontrol will take place in 1954, and the problem of slaughtering facilities will then arise in the Rural District. From preliminary reports it is evident that improvements will be required in the standard of all slaughterhouses throughout the District. The problem facing the Council is to know just how extensive should be their requirements in view of the short time private slaughtering will be permitted.

MILK

There are three retailers holding Supplementary Licences in the area as follows :

Kidderminster C.W.S.	...	...	T.T.
			Pasteurised
Wolverhampton C.W.S.	...	...	T.T.
			Pasteurised
Imperial Dairies	...	...	T.T.
			Pasteurised

ICE CREAM

The number of ice cream retailers increased during the year from 27 to 35 ; in all cases selling prepacked ice cream.

15 Samples of ice cream were taken during the year, the results being as follows :—

Grade I ...	...	...	10
Grade II	...	...	4
Grade III	...	...	1

These results are satisfactory.

FOOD INSPECTION

The following quantities of foodstuffs were condemned during the year as being unfit for human consumption :—

					Lbs.	Ozs.
Tinned Chicken	...	...	...	...	3	10
Tinned Meat	...	...	...	...	28	2
Fish ...	...	...	...	...	101	—
Tinned Milk	...	...	...	...	17	
Dried Milk	...	...	...	...	21	
Tinned Cream	...	...	...	...	—	8
Tinned Vegetables	...	...	...	...	14	1
Tinned Fruit	...	...	...	...	15	11

FOOD PREMISES

(a) The types of food premises in the area :

1. Butchers' shops	...	...	...	...	...	13
2. Fried Fish shops	...	...	...	...	...	3
3. Bakeries	...	...	...	...	...	5
4. Premises serving sandwiches and other light meals						46
5. Licensed premises	...	...	...	...	...	50
						<hr/> 117 <hr/>

(b) Premises registered under Section 14 of the Food and Drugs Act, 1938.

1. Manufacture of sausages, pressed meat, etc.	...	8
2. Ice cream dealers	...	35
3. Fish fryers	...	3
		<hr/> 46 <hr/>

(c) Inspection

During the year 6 inspections of food premises have been made. Staff shortages and the amount of other work requiring to be done have made it impossible to carry out more frequent visits, and with the advent of local meat inspection the situation is likely to become ever more strained.

SECTION F

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE

The following cases of Infectious Disease were notified during the year :

Measles	...	...	...	...	...	121
Whooping-cough	...	...	...	...	...	61
Pneumonia	...	...	...	...	...	36
Scarlet Fever	...	...	...	...	...	25
Tuberculosis (Respiratory)	...	...	...	...	...	7
(Non-respiratory)	...	...	...	...	...	2
Meningococcal infection	...	...	...	...	...	2
Poliomyelitis	...	...	...	...	...	2
Food poisoning	...	...	...	...	...	1
Ophthalmia Neonatorum	...	...	...	...	...	1
Erysipelas	...	...	...	...	...	1
Vaccinal Encephalitis	...	...	...	...	...	1

MEASLES

There is a reduction in the number of cases of measles as compared with 1952, when 235 cases were notified. The heaviest incidence occurred during the first four months of the year when 98 of the total were notified.

WHOOPING-COUGH

Whooping-cough was more prevalent in 1953 than in the previous year, when only 42 cases occurred. Children aged 1-6 years were chiefly affected (50 of the total 61 cases occurring in this age-group). No cases occurred under the age of 1 year. The cases were fairly evenly spread over the year with a peak in September, when 15 were notified.

Immunisation against whooping-cough, probably now the most distressing and dangerous of all the infectious diseases of childhood is now available and is best commenced about 4-5 months of age. It may also be combined with diphtheria immunisation, thus reducing the total number of injections required when protection against both diseases is conferred separately.

SCARLET FEVER

25 cases of scarlet fever were notified, as compared with 56 in 1952. Of these 25 cases, 12 occurred in young National Service men in the R.A.F.

PNEUMONIA

Of the 36 cases of pneumonia, 28 occurred in R.A.F. personnel. There were only 13 cases of this disease notified during 1952.

VACCINAL ENCEPHALITIS

The notification of Vaccinal Encephalitis concerned a young R.A.F. man of 19. It is probable that he had not been vaccinated in infancy, and the occurrence brings home very forcibly the desirability for vaccination in the first six months of life. When this protection is conferred for the first time in adult life, as may be necessary on entry into the Armed Forces, for emigration purposes, or during an outbreak of small-pox, there is always some risk of unpleasant local and general reactions, and possibly complications, as in this case. When the procedure is done in infancy, however, such risks are very slight, and with modern methods almost negligible.

Vaccination is no longer compulsory by law, but it is far from being no longer necessary as some are apt to imagine. With the speed and extent of present-day travel, especially air-travel, it is quite possible that a person may arrive in this country from abroad while in the incubation period of small-pox, and suffering no very definite symptoms, and thus disseminate the disease among those with whom he comes in contact, who have not been protected by successful vaccination.

Valuable work is done by the Health Visitors in encouraging mothers of young babies to have them vaccinated and on the whole their response is good, but there are still many who for one reason or another, or for no good reason at all, refuse their children this protection.

POLIOMYELITIS

Two cases of this condition were notified, but in neither case did serious paralysis result.

There were again no cases of Typhoid Fever, Small-pox or Diphtheria notified in this area.

Immunisation against diphtheria was continued as in previous years at the Child Welfare Clinics, at Schools and by general practitioners. Despite the absence of cases of this disease in the area over the past few years, it still remains essential that babies should receive protection against it, and this is best commenced at about 6-8 months of age. A further injection is also advisable at the age of 5 years before the child starts school to boost the level of immunity, and subsequent doses may be given at intervals of 4-5 years during school life.

TUBERCULOSIS

The number of cases on the Tuberculosis Register at the end of 1953 were as follows :—

Respiratory			Non-Respiratory		
Male	Female	Total	Male	Female	Total
30	18	48	8	7	15

NEW CASES

Nine new cases of tuberculosis were notified during the year, seven affecting the respiratory system, and two of the non-respiratory form of the disease. In 1952 there were 8 new cases (4 respiratory and 4 non-respiratory).

Of the seven new respiratory cases, there were 4 males (aged 37, 42, 42 and 49) and 3 females (aged 3, 26 and 53). The two non-respiratory cases were both males, aged 2 years and 8 years.

DEATHS

There were 2 male deaths registered as due to Tuberculosis, as compared with 4 deaths in 1952. Both were due to the respiratory form of the disease. The Tuberculosis Death-Rate per 1,000 of the population was thus 0.121 (0.242 in 1952).

CANCER

There were 23 deaths due to cancer during the year, 10 male and 13 female. Of this total, one was due to cancer of the lung or bronchus. In 1952 there were 24 deaths due to cancer.

The death-rate was 1.391 per 1,000 of the population (1,447 in 1952).

